

ACOUSTIC TRANSECT DATASHEET

Investigator Name(s): _____

County: _____ Date: _____

Anabat ZCAIM #	Transect Code or # (ex. KY-Scott Co.-1)
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Start lat/long (decimal degrees): N E

End lat/long (decimal degrees): N E

	Time	Temp. (F)	Wind Speed	Moon Visible?	% Cloud Cover	Moon Phase		
Start Survey:						new		3/4
End Survey:						1/4		full
						1/2		

Comments (ex. high insect noise, lots of traffic, break in sampling, etc):

Please attach map with any corrections/additions/comments